the latter deaths. Suicide was the second leading cause of death among Tennesseans aged 25-34 (comprising 12.3% of deaths) and third for those aged 15-24 (10.8% of deaths). Homicide was the second leading cause of death for 15-24 year-olds in 2001 and the third for those 25-34 years of age, at 13.8% of the former and 10.3% of the latter deaths.

- Homicide was the leading killer among black males aged 15-34, comprising 34% of deaths, followed by unintentional injuries at 21.4%. Among white males aged 15-34, after unintentional injuries at more than half of deaths, suicide ranked second at 16%, and among corresponding black males (8%) and white females (8.7%), it ranked third. Rates in that age-group for white and black males were 23.8 and 20.6 suicides per 100,000 population, respectively. For white females, the suicide rate was 5.4, and 1.3 for black females.
- Respective heart disease death rates in 2001 for white females, white males, black males, and black females were 293.4, 288.6, 234.1 and 240.1 deaths per 100,000 population. Corresponding death rates for the second largest cause of death, cancer (malignant neoplasms only vs. all neoplasms), were 200.1, 251.3, 206.6 and 179.5 per 100,000. Together, heart disease and cancer accounted for nearly half of the deaths among white females (49%), black males (47%), and black females (49%), and more than half of deaths among white males (53%).

Infant/Neonatal/Postneonatal Mortality

Infants are children under one year of age. In 2001, Tennessee's infant mortality rate was 8.7 deaths per 1,000 live births. The rate for blacks was 16.2 and 6.7 for whites. Neonatal deaths are deaths to infants under 28 days of age. Respective neonatal death rates in 2001 for the overall Tennessee population, for blacks and for whites were 5.6, 10.6 and 4.2 per 1,000 live births. Postneonatal deaths are deaths to infants aged 28 days and older. Postneonatal death rates were 3.1, 5.6 and 2.5 per 1,000 live births for the Tennessee population, blacks and whites, respectively. Neonatal mortality predominantly reflects endogenous causes genetic problems or problems associated with pregnancy. By contrast, postneonatal mortality predominantly stems from exogenous or socio-environmental causes. Increases in postneonatal death rates, especially among blacks, raises concern related to increases in low weight births, SIDS, and low or inadequate prenatal care accompanying increases in poverty rates.